



My Health, My Care: 24/7 Access to VA





**American Customer Satisfaction Index** 



Annual Review OS



Use of the American Customer Satisfaction Index (ACSI) Survey to Measure Satisfaction with the My HealtheVet Personal Health Record (PHR), and to Identify Users' Characteristics, Needs, and Preferences

## **INTRODUCTION**

In 2003, the Veterans Health Administration (VHA) of the United States Department of Veterans Affairs (VA) introduced My Health eVet, a web-based PHR. My Health eVet complements traditional services, improves co-managed care, and empowers patients and their families to play a more active role in Veterans' health care.

The My Health eVet portal at www.myhealth.va.gov enables Veterans to create and maintain a robust PHR that includes access to trusted patient health education information; a comprehensive personal health journal; electronic services such as online VA prescription refill requests and personalized Wellness Reminders; and additional features. The My Health eVet program is based on the core belief that knowledgeable patients are better able to make informed health care choices, stay healthy, and seek services when needed. The primary goal of the Program is to empower Veterans with improved quality, access, and value of health care services, as well as increase patient satisfaction.

Additional features will enable VA patients to view their VA appointments, co-payment balances, and additional portions of their VA electronic health records online such as laboratory test results. My Health eVet Secure Messaging will be expanded to additional facilities, providing Veterans with the ability to communicate electronically with their VA health care team as an effective and desirable supplement to traditional health care interactions. The ability to delegate access to all or selected parts of the PHR has been piloted successfully and is being developed as a future enhancement.

## **Getting Started With My HealtheVet**

Veterans and VA staff can visit the My
HealtheVet website at www.myhealth.
va.gov and self register to create an
account although registration is not
required to view the professionallysponsored health education resources
organized in the site's various Condition
Centers, Healthy Living Centers, and
educational resource collections. Once
registered, Veterans and staff can create
a customized PHR that is accessible from
any computer with Internet access.

For Veterans who are VA patients, a onetime process of In Person Authentication (IPA) at a local VA facility provides access to additional features, such as the ability to import extracted VA electronic health record data to create a complete summary of both VA medications and the patient's self-entered prescriptions, over the counter medications, herbals, and supplements. The site also includes services such as online VA prescription refill requests, a customizable health calendar, online learning modules, Wellness Reminders for preventive care, and self-assessment tools.

My HealtheVet users can track and graph measures such as weight, blood pressure, and blood glucose. Medications, immunizations, and allergies can be recorded and kept current as an important reference for health care interactions. Food and activity journals promote health and wellness through proper diet and exercise. Health history, including medical events and self, family, and military health history can be documented, providing an important summary of pertinent information. A customized personal health summary can be generated and printed for sharing with any health care provider at the patient's next clinic visit.

## My HealtheVet Stats

As of July 2009, the My HealtheVet program serves more than 828,000 registered users, which represents 17% of VA patients receiving health care services. More than 130,000 of these registrants have upgraded to IPA accounts, enabling access to the initial extracts of VA electronic health record data from VistA, VA's electronic health record system. Total visits to My HealtheVet since it was launched on November 11, 2003 have exceeded 30 million. Since the availability of online, interactive ordering of VA prescription refills in August 2005, Veterans have refilled more than 11 million prescriptions using My HealtheVet.

## **About the ACSI**

The ACSI Survey is an industry standard tool for assessing consumer drivers of satisfaction and prioritizing areas of improvement. Established in 1994, the **ACSI tracks trends in customer satisfaction** and is produced by a partnership between the University of Michigan Business School, the American Society for Quality, and the CFI Group. ACSI scores are based on data from random, voluntary webbased surveys and are recorded on a scale from 0-100. The ACSI methodology uses the "voice of the customer" technique to produce actionable results (scores, priority maps, and benchmarks) which represent customer wants and needs in a hierarchical structure that reflects both relative importance and satisfaction.

## **VETERANS VOICES**

Measuring satisfaction and soliciting direct feedback are important components of the My HealtheVet Performance Evaluation Program. One survey technique that has been deployed is the ACSI Survey. The My HealtheVet ACSI Survey was implemented in October 2007 in order to measure and monitor Veteran satisfaction and to identify and prioritize areas for improvement. An ongoing process of analysis is used to develop custom questions and data segmentation to generate additional insights about Veterans' needs and preferences. This report summarizes data collected using the ACSI methodology from October 2007 through October 2008. The data provides a rich and informative view of My HealtheVet users' characteristics, preferences, and patterns of adoption; laying an important foundation for program development.

## **HOW WE USE THE ACSI**

The advantages of using the ACSI tool for program evaluation is that it:

- Provides direct measurement of customer satisfaction, which incorporates pre-approved Office of Management and Budget (OMB) clearance
- Enables benchmarking against other government and industry websites
- Supports the prioritization of website enhancements based on potential impact on user satisfaction

In addition, supplementing ASCI model questions with VHA custom questions generates rich data about our users' characteristics, needs, and preferences. By collecting direct Veteran and stakeholder feedback, this survey is used to identify opportunities for program enhancements, and as a foundation for developing targeted evaluation strategies.

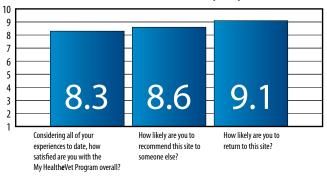
## **RESULTS: ACSI MODEL QUESTIONS**

The My Health**eV**et ACSI data represents a random sample of visitors (n=100,617) who navigated at least four pages on the site. The element and satisfaction scores are weighted averages of responses to two to four individual survey questions for each element.

## SATISFACTION

Summary satisfaction ratings indicate Veterans are highly satisfied with the My Health eVet Program (8.3 on a scale of 1 to 10); highly likely to recommend the site to other Veterans (8.6 on a scale of 1 to 10); and, highly likely to return to the site (9.1 on a scale of 1 to 10).

## **SATISFACTION SURVEY (1-10)**



## Sampling Percentage: 4%

About the My Health*e*Vet ACSI Data

Survey Period: October 2007-October 2008

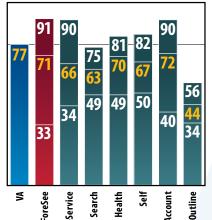
Loyalty Factor: 4 pages
Response Rate: 17%

Random Sample: n=100,617

## **BENCHMARKING**

The aggregate My Health eVet ACSI score from October 2007 through October 2008 (75) exceeded the 3rd quarter 2008 E-Gov aggregate score (73.9), and citizen satisfaction with government overall (67.8) as reported in the ACSI E-Government Satisfaction Index for October 2008. Quarterly reviews during the time period demonstrate My Health eVet site visitors score satisfaction notably higher than key benchmarks including averages for ForeSee Results Company-wide, E-Gov, and E-Gov Information sites. The graph displays a sample benchmarking report for February 2009, comparing the My Health eVet ACSI score (77) with other sites. Each of the My HealtheVet element scores (content, functionality, look and feel, navigation, and search) exceeded these benchmarks, while site performance was equivalent. With this strong baseline, the ACSI data highlights the impact of system changes on user satisfaction, including the release in 2009 of additional services rated most highly by ACSI respondents.

## E-SERVICE BENCHMARKING DATA February 2009

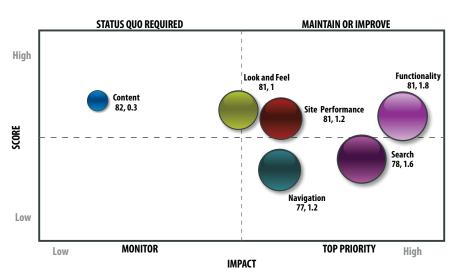




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# PRIORITY MAP October 24, 2007-October 24, 2008



Key:
Position of each bubble indicates its score and impact
Size of each bubble also indicates the relative size of impact

# PRIORITIZING IMPROVEMENTS

The ACSI Priority Map is used to identify drivers of satisfaction which represent the top priorities for improvement. For My HealtheVet, satisfaction is highest with content, functionality, look and feel, and site performance. The top priority areas for improvement are navigation and search, based on level of satisfaction and potential impact of improvements. Site redesign and search engine refinement projects are planned to address these areas. Monitoring subsequent ACSI scores will show the impact of these improvements.

# RESULTS: ACSI CUSTOM QUESTIONS

A pool of more than 50 custom questions have cycled through the survey since its inception, resulting in data used to better understand characteristics and preferences of users. Custom questions are reviewed on a monthly basis and are added and suspended as needed, based on data analysis performed by the multidisciplinary Performance Evaluation Workgroup of the My HealtheVet Clinical Advisory Board.

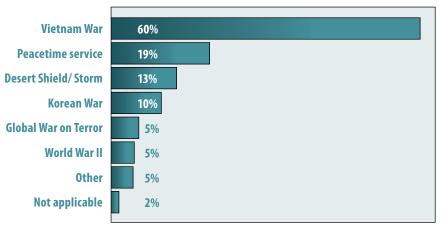
## **USER DEMOGRAPHICS AND CHARACTERISTICS**

Survey respondents are predominantly Veterans (93%), although a small percentage are family members of a Veteran (5%). In addition, multiple roles may be selected; however, these each represent 1% or less of the respondent pool. Likewise, for military period of service, respondents are able to select multiple categories. The majority of respondents served in the Vietnam War (60%). The second most common period of service indicated is Peacetime Service (19%), followed by Desert Shield/Desert

Storm (13%). Other periods of service are represented, enabling further segmentation for additional analysis.

The majority of respondents, 68%, are between the ages of 51 to 70 years old, 16% are 71 years or older, and 15% are between the ages of 31 to 50 years old. In July 2008, additional data was collected using more narrow age ranges to compare the population of My Health eVet registrants and the Veteran population overall. Consistent with earlier data, 68% of the respondents are between the ages of 50 and 69.

## **MILITARY PERIOD OF SERVICE**



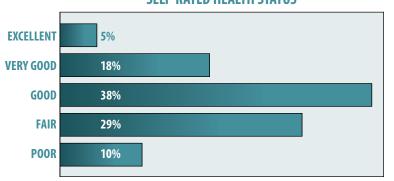


# 71 + 16% 61-70 34% 51-60 34% 41-50 11% 31-40 4% 19-30 1%

Survey respondents are predominantly male (91%), consistent with both the population of My Health eVet registrants (88%) and the Veteran population overall (93%). For the subset of respondents who indicated they served in the Global War on Terror (n=5626), a greater percentage are women Veterans (19% compared to 9%). When asked to rate their overall general health status, the majority of respondents report good (38%) or fair (29%) health, although 10% rate their health as poor.

The top ten respondent states of residence are identical to the top ten states for account registration, with the highest number from Florida (10%), Texas (9%), and California (8%). In comparison with the Veteran population, California, Florida, and Texas also have the greatest number of Veterans overall. All other states are represented in the ACSI respondent pool, while a small percentage (1%) live elsewhere. This data correlates well with My HealtheVet registration data, indicating that the respondent population in general mirrors the population of registered users.

## **SELF-RATED HEALTH STATUS**



## **ACCESS PATTERNS**

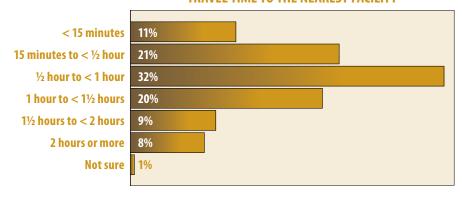
Travel time to the nearest VA facility is an important user characteristic both in terms of access to services and ability to complete the IPA process. Notably, 37% indicate their travel time to the nearest facility is one hour or more. Eight percent must travel two hours or more to reach their nearest VA facility. Nearly all respondents (96%) have used VA services in the past 12 months, reflecting the high proportion of users eligible to obtain an authenticated account by visiting their VA facility.

The majority of respondents have used mostly VA facilities for routine outpatient care in the last 12 months (84%), although a significant percentage (14%) has mostly used

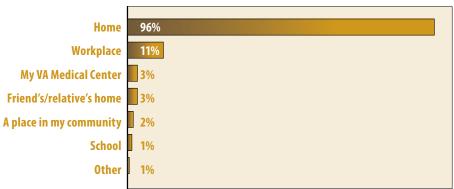
a non-VA hospital or clinic. When asked about their use of urgent care or emergency room services in the last 12 months, of those who did receive these services (54%), more than half used a VA hospital or clinic.

Nearly all respondents access the My HealtheVet web site from home (96%), the most frequent site of access, although visitors also access the site from their workplace (11%), VA medical center (3%), and other locations as well. Fully 91% of respondents report using a high-speed Internet connection to access the portal, although My HealtheVet will continue to be compatible with dial-up Internet access (7%).

## TRAVEL TIME TO THE NEAREST FACILITY

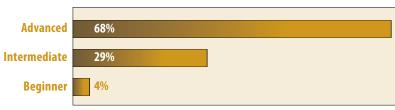


## **ACCESS LOCATIONS**





## **SELF-RATED INTERNET ABILITY**



Interestingly, most users rate their ability in using the Internet as advanced (68%) or intermediate (29%). For the subset of respondents who indicated they served in the Global War on Terror, 78% rate their ability as advanced, supporting the belief that system adopters from the newest generation of Veterans often have higher levels of computer literacy.

Respondents are predominantly registered account holders at the My HealtheVet website (95%), giving them access to a fuller range of tools and features. For VA patients, the one-time IPA process allows access to the full range of site features, including online VA prescription refill renewal by medication name and access to their VA prescription history. In March 2009, Wellness Reminders for preventive care were also made available to

authenticated VA patients. Although the majority of respondents have been authenticated (60%), a significant percentage has not (24%) or is not sure (15%). A qualitative review of open ended responses using a comment cluster tool provided by ForeSee reveals some of the reasons respondents cite for not being authenticated. The data shows many users are not familiar with "authentication," or do not understand how to become authenticated. Other respondents note that they forgot to accomplish this at their most recent visit to a VA facility, or intend to at an upcoming VA appointment. Improvements in communication, marketing, and processes used for authentication are underway to ensure eligible users will have access to important features that rely upon authentication.

## **USAGE**

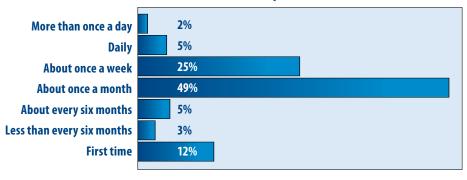
Most respondents indicate they visit the My Health eVet website about once a month (49%), while another 25% visit about once a week. Twelve percent reported being first time visitors. Some users (2%) visit more than once a day.

Understanding what users are trying to accomplish when they visit the site is an important factor in prioritizing portal features to meet user needs. As the most requested transactional service, online VA prescription refills is reported by respondents as the top objective of their visit (75%). The second highest objective reported is access to a user's prescription history from their VA medical record (24%),

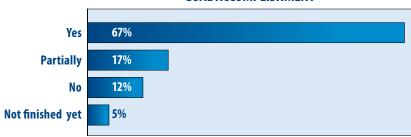
followed by looking up information about a medication (18%). These pharmacy-related features currently represent user's top objectives. As additional transactional services are rolled out, this question will continue to reveal important insights about user's priorities.

To locate information, most respondents report browsing the site to locate information (41%), while another 31% use navigational quick links. Only 16% of visitors report using the site's search feature. Although the majority of respondents (67%) indicate they accomplished the goal of their visit, a significant percentage indicate they only partially accomplished (17%)

## FREQUENCY OF USE



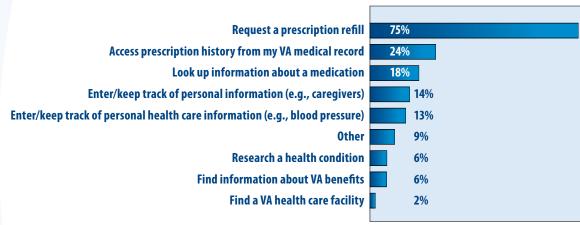
## **GOAL ACCOMPLISHMENT**





or didn't accomplish (12%) what they wanted to. In May 2008, an additional response choice ("not finished") was added to determine if respondents were being prompted to participate in the survey prior to accomplishing their goal (5%). A qualitative review of open-ended responses using a comment cluster tool provided by ForeSee reveals some of the objectives respondents wanted to accomplish, but couldn't. Most of the responses revealed the desire to view or manage VA appointments, or view VA medical record data. Both of these capabilities are currently being field tested and developed for release. As additional transactional services are rolled out, it is anticipated that an even greater number of users will achieve their desired goals using the site.

## **GOAL TRYING TO ACCOMPLISH**



## **PREFERENCES**

When asked about additional features desired, 87% of respondents (79,892 veterans) wish to view upcoming VA appointments, 74% want to schedule or change their appointments, 73% want to view information from their VA medical record, and 64% would like online secure communication with their doctor. The rank order of these and other desired features represent important direct feedback from Veterans and stakeholders which will continue to be used to prioritize site development. When asked about

the kinds of medical records users would like included in their PHR, 90% requested access to their VA medical record, 64% also desire access to their military service health records, and 33% want access to their medical records from other non-VA providers. Only 3% (634 of 20,244 respondents) indicate that they do not want their records to be available on My HealtheVet. Currently, users may access PHR functions without necessarily integrating medical record data.

My HealtheVet visitors are also presented with an opportunity to add free text comments and suggest improvements through the ACSI survey. The most common improvement noted is for VA appointment views and management, both of which are currently being developed for release. The second most common improvement suggested is the ability to view VA medical record data; a feature that is currently available for VA prescription data with additional extract types under development for future release. Of the comments related to prescription refill, many ask for the ability to view medication names when requesting prescription

refills. Although this feature is currently available to users who have been authenticated, lack of awareness of this feature reveals the need to deploy additional communications. In-depth analysis of this direct Veteran and stakeholder feedback will continue in order to be responsive to user suggested improvements. The majority of ACSI respondents (56%) agree that use of My HealtheVet has improved their ability to manage their health. It is anticipated that new features identified as desirable services by users will have a positive impact on user goal accomplishment and satisfaction.

## **ADDITIONAL SERVICES DESIRED**



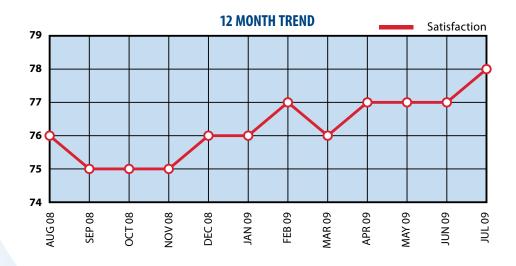
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## **Conclusion**

This report provides a summary of ACSI data which reveals Veteran satisfaction, identifies priority areas for improvement, and highlights important information about users' characteristics, preferences, and needs. Additional data collection and analysis will be used to determine what works well for users and what may need to be improved. The value of direct Veteran feedback is critical in this process. With the upcoming release of several new highly desired features based on Veteran feedback, My HealtheVet aims to optimize the program and expand reach by increasing the number of Veterans using the portal. The ACSI will continue to be used to capture the "voice of the Veteran" and to measure customer satisfaction trends as program improvements are implemented and new features rolled out in response to Veterans' needs. Additional research will be conducted with non-adopters to identify barriers to system adoption and use.

## **Update: My HealtheVet ACSI Score Rising: JULY 2009**

The average My HealtheVet ACSI score from October 2007 through October 2008 was steady at 75, based on a random sample of more than 100,000 Veteran responses. This score exceeded the 3rd quarter 2008 E-Government Index (73.9), and citizen satisfaction with government overall (67.8). In the first quarter of 2009, the My HealtheVet Satisfaction Index rose from 75 to 76. In contrast, the ACSI E-Government Satisfaction Index for the same time period declined to 73.6. A twelve month trend for the My HealtheVet ACSI score demonstrates rising satisfaction, with an increased score of 78 for July 2009.







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For more information about My HealtheVet, go to www.myhealth.va.gov